

2008

FORM 1100-EXT	DELAWARE DIVISION OF REVENUE CORPORATION INCOME TAX REQUEST FOR EXTENSION	REV CODE 0042 25 05
----------------------	--	--------------------------------

Federal Identification Number	Calendar or Fiscal Year Ending	Due on or Before	Extension To
Name of Corporation			
Number, street and room or suite number or P.O. Box			
City	State	Zip Code	
1. Income Tax Liability (8.7% x Non-Resident Distributon Income)		\$.00
2. Tentative Tax Due (100% of Line 1)		\$.00
3. Less Amount of Tentative Tax Previously Paid		\$.00
4. Balance Due (Line 2 minus Line 3)		\$.00

INSTRUCTIONS FOR FILING A REQUEST FOR EXTENSION

An extension of six months for filing the annual Delaware Corporation Income Tax return may be made by filing Form 1100-EXT on or before the due date of the original return. Please note that timely filed extensions extend the period of time for filing a final return but **DO NOT** extend the period of time for making payment. **Payment of the anticipated liability must be made with the extension request. Extensions without payment of the anticipated liability will not be granted.**

Please use the schedule below to determine the due date of the extension request and the period the Delaware corporate return is extended to and place this information in the appropriate boxes above:

Tax Year Ending	Due on or Before	Extended To:
12/31/2008	04/01/2009	10/01/2009
01/31/2009	05/01/2009	11/02/2009
02/28/2009	06/01/2009	12/01/2009
03/31/2009	07/01/2009	01/04/2010
04/30/2009	08/03/2009	02/01/2010
05/31/2009	09/01/2009	03/01/2010
06/30/2009	10/01/2009	04/01/2010
07/31/2009	11/02/2009	05/03/2010
08/31/2009	12/01/2009	06/01/2010
09/30/2009	01/04/2010	07/01/2010
10/31/2009	02/01/2010	08/02/2010
11/30/2009	03/01/2010	09/01/2010

CONSOLIDATED DELAWARE CORPORATE INCOME TAX RETURNS

Consolidated Corporate Income Tax returns are not permitted under Delaware Law. Each corporation which is a member of a consolidated group must file separate Delaware Corporate Income Tax returns and Extensions as if a separate Federal Income Tax return was filed.

_____	____/____/____	() _____
Authorized Signature	Date	Telephone Number

Mail to: Delaware Division of Revenue, P.O. Box 8751, Wilmington, DE 19899-8751 or FAX (302) 577-8203

